Application Data She t

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?

Title:: HYDROSTATIC TRANSMISSION

Attorney Docket Number:: 36400.35US2

Request for Early Publication?:: No

Request for Non-Publication?:: Yes

Suggested Drawing Figure:: 25

Total Drawing Sheets:: 27

Small Entity:: No

Petition Included?:: No

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Herb M.

Family Name:: Poplawski

Name Suffix::

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State or Province of Residence::

Country of Residence:: US

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City of mailing address:: Sullivan

State or Province of mailing address:: IL

Country of mailing address:: US

Postal or Zip Code of mailing address:: 61951

Applicant Authority type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Thomas D..

Family Name:: Wiley

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State or Province of Residence::

Country of Residence:: US

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City of mailing address:: Lovington

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Country of mailing address:: US

Postal or Zip Code of mailing address:: 61937

Applicant Authority type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: John D.
Family Name:: Schreier

Name Suffix::

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State or Province of Residence:: WI

Country of Residence:: US

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City of mailing address:: Fitchburg

State or Province of mailing address:: WI

Country of mailing address:: US

Postal or Zip Code of mailing address:: 53711

36400.35US2

Applicant Authority type:: Inventor Primary Citizenship Country:: US Status:: **Full Capacity** Michael L. Given Name:: Family Name:: Bennett Name Suffix:: City of Residence:: Sullivan State of Province of Residence:: IL US Country of Residence:: Street of mailing address:: 709 W. Jefferson Street City of mailing address:: Sullivan State or Province of mailing address:: IL Country of mailing address:: US Postal or Zip Code of mailing address: 61951 Applicant Authority type:: Inventor **Primary Citizenship Country::** US Status:: **Full Capacity** Given Name:: Lonnie E. Family Name:: Holder Name Suffiz:: City of Residence:: Sullivan State or Province of Residence:: IL Country of Residence:: US 18 Chad Avenue Street of mailing address:: City of mailing address:: Sullivan State or Province of mailing address:: IL Country of mailing address:: US Postal or Zip Code of mailing address:: 61951 Applicant Author type:: Inventor

US

Primary Citizenship Country::

Status:: Full Capacity

Given Name:: Ralph A.

Family Name:: McClelland

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Correspondence Information

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Representative Information

Representative Customer Number:: 25541

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

This application continuation of 10/187,931 07/02/02

Foreign Priority Information

Country:: Application Number:: Filing Date:: Priority Claimed::

Assignment Information

Assignee Name:: Hydro-Gear Limited Partnership

Street of mailing address:: 1411 S. Hamilton Street

City of mailing address:: Sullivan

36400.35US2

State or Province of mailing address::

Country of mailing address::

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